

CHAR410 Online <small>Form</small> For new registrations, Amendments, and Re-registrations	Registration Statement for Charitable Organizations New York State Office of the Attorney General Charities Bureau - Registration Section 28 Liberty Street New York, NY 10005 www.charitiesnys.com	Open to Public Inspection
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Filing Information			
Type of Filing:	<input checked="" type="radio"/> Registration	<input type="radio"/> Amendment	<input type="radio"/> Re-Registration

Contact Information			
1. Name of Charity #WalkAway Foundation		5. EIN 832820906	
2. c/o Name (if applicable)		6. Website www.walkawaycampaign.com	
3. Mailing address (Number and street) 3133 Tiger Run Court	Room/suite 111	7. Primary contact Libby Albert	
City or town, state or country and ZIP+4 Carlsbad, California, 92010, United States		Title Executive Director	
4. Principal address (Number and street) 441 North Lee Street	Room/suite 100	Phone 561-420-3511	Primary Contact Email libbyalbert@walkawaycamp
City or town, state or country and ZIP+4 441 North Lee Street, 100, Alexandria, Virginia, 22314, United States		Organization Email info@walkawaycampaign.com	

3rd Party Preparer Information				
1. Name GariAnn Rugg			4. Title Registration Agent	
2. Name of Firm Charity Compliance Solutions, Inc.			5. Phone 442-888-1300	
3. Mailing address (Number and street) 3133 Tiger Run Court		Room/suite 111	6. Email gariann@charitycompliancesolutions.com	
City Carlsbad	State/Province California	Postal Code 92010	Country United States	7. Alternate Email

Statute Review	
1. Does the organization conduct activity (other than soliciting) in New York State?	<input type="radio"/> Yes <input checked="" type="radio"/> No
2. When did the organization begin conducting activity?	
3. Does the organization maintain assets in New York State?	<input type="radio"/> Yes <input checked="" type="radio"/> No
4. Does the organization solicit, or plan to solicit or receive more than \$25,000 in total contributions from New York State residents, foundations, corporations or government agencies?	<input checked="" type="radio"/> Yes <input type="radio"/> No
5. If already soliciting, when did this activity begin?	
6. Does the organization contract with or plan in the future to contract with a professional fundraiser or fundraising counsel?	<input type="radio"/> Yes <input checked="" type="radio"/> No

Exemption

1. Does the organization receive substantially all of its contributions from a government agency to which it submits annual financial reports? ☐ Yes ☒ No
2. Does the organization receive an allocation from a federated fund, United Way or incorporated community appeal? ☐ Yes ☒ No
3. Is the organization a government agency, controlled by a government agency, the U.S. Congress or New York State Legislature? ☐ Yes ☒ No
4. Was the organization formed for religious purposes? ☐ Yes ☒ No
5. Is the organization incorporated under the New York State Education Law? ☐ Yes ☐ No
6. If the organization is an educational institution, does it limit solicitation of contributions to the student body, alumni, faculty, trustees and their families? ☐ Yes ☒ No
7. Is the organization an educational institution or museum that files annual financial reports with the Board of Regents of the State University of New York or an agency with similar responsibilities in another state? ☐ Yes ☒ No
8. Is the organization a historical society chartered by the Board of Regents of the State University of New York?
- 8a. Does the organization solicit contributions only from its membership? ☐ Yes ☒ No
9. Is the organization a library that files annual financial reports as required by the NYS Department of Education? ☐ Yes ☒ No
10. Is the organization a hospital, skilled nursing facility or diagnostic/treatment center? ☐ Yes ☐ No
11. Is the organization a membership organization?
- 11a. Does the organization solicit contributions only from its membership? ☐ Yes ☐ No
12. Is the organization a volunteer firefighters or volunteer ambulance service organization? ☐ Yes ☐ No
13. Is the organization a veterans' organization, volunteer firefighters, volunteer ambulance corps, or an auxiliary of such organization and is its fundraising performed only by its members without direct or indirect compensation? ☐ Yes ☒ No
14. Is the organization a police department, sheriff's department or other government law enforcement agency? ☐ Yes ☒ No
15. Is the organization a law enforcement support organization that only solicits contributions from its members? ☐ Yes ☒ No
16. Is the organization a cemetery corporation subject to Article 15 of the NYS Not-for-Profit Corporation Law? ☐ Yes ☐ No
17. Is the organization a PTA affiliated with an educational institution subject to the jurisdiction of the NYS Education Department? ☐ Yes ☒ No
18. Is the organization incorporated under Article 43 of NYS Insurance Law? ☐ Yes ☐ No

Based on initial and exemption review, the organization is required to register under: **Executive Law 7-A**

Registration			
1. What type of organization is it? Corporation			
a. Does the organization have Federal tax exemption status? No Which status? 501(c)(3)		d. Was the organization ever denied tax exempt status? No	
b. Has the organization applied for tax exemption status? Yes When did it apply? 12/31/2018		e. Has the organization had its tax exempt status revoked? No When was it revoked?	
c. Organization's fiscal year end 12/31		f. When was the organization incorporated or formed? 12/20/2018 State in which incorporated or formed Virginia	
2. List all chapters, branches and affiliates of your organization (For additional rows, please use Appendix)			
Organization Name	Relationship	Mailing address (number and street, room/suite, City or town, state or country and zip+4)	
3. List all officers, directors, trustees, key persons/key employees (For additional rows, please use Appendix)			
Name	Title	Mailing address (number and street, room/suite, city or town, state or country and zip+4)	Email
Brandon Straka	President/Treasurere	441 North Lee Street, Suite 100, Alexandria, Virginia, 22314, United States	brandon.straka@yahoo.com
Libby Albert	Executive Director	441 North Lee Street, Suite 100, Alexandria, Virginia, 22314, United States	libbyalbert@walkawaycampaign.com
Maria Albanese	Director	441 North Lee Street, Suite 100, Alexandria, Virginia, 22314, United States	info@walkawaycampaign.com
Tracy Diaz	Director	441 North Lee Street, Suite 100, Alexandria, Virginia, 22314, United States	info@walkawaycampaign.com
4. Other Names, Previous Names, and Registration Numbers			
a. Names/DBA/Assumed Names		c. Previous organization names	
b. Prior New York State charities registration numbers			

5. Describe the organization's charitable purposes

#WalkAway Foundation will encourage people to independently evaluate their personal perspective and bias related to their views of public policy and governance.

6. Has the organization been prohibited by a government agency or court from soliciting contributions?
☐ Yes ☒ No

If "Yes", describe:

7. Have any of the organization's officers, directors, trustees, key persons/key employees been prohibited by a government agency or court from soliciting contributions?
☐ Yes ☒ No

If "Yes", describe:

8. Has the organization or its officers, directors, trustees, key persons/key employees been found in violation of any law in soliciting for a charity?
☐ Yes ☒ No

If "Yes", describe:

9. Has the organization or its officers, directors, trustees, key persons/key employees ever entered into any agreement with any regulatory body regarding its conduct in connection with any fundraising activity or misappropriation or misuse of the organization's money or property?
☐ Yes ☒ No

If "Yes", describe:

10. Has the organization's registration or license been suspended by a government agency?
☐ Yes ☒ No

If "Yes", describe:

11. Does the organization solicit or plan to solicit contributions in New York State?
☒ Yes ☐ No

If "Yes", describe:

Contributions will be used for creation and distribution of educational materials, creation and maintenance of a website and email list to provide information and education, the creation of audio-

12. Has the organization engaged fundraising professionals for fundraising in New York State?
☐ Yes ☒ No

Name	Type of FRP (see instructions for definitions)	Mailing address (number and street, room/suite, city or town, state or country and zip+4)	Dates of contract
	P F R <input type="checkbox"/> F R C <input type="checkbox"/>		Start date: End date:
	P F R <input type="checkbox"/> F R C <input type="checkbox"/>		Start date: End date:
	P F R <input type="checkbox"/> F R C <input type="checkbox"/>		Start date: End date:

13. Does the organization have a conflict of interest policy?
☒ Yes ☐ No
14. Does the organization have a whistleblower policy?
☐ Yes ☒ No
15. Attached organization's required documents:

- ☒ Certificate of incorporation, including amendments or other organizing document
- ☒ Bylaws or other organizing document
- ☒ Other organizing documents (if applicable)

Signatures

I certify under penalty for perjury that I reviewed this Registration Statement, including all schedules and attachments, and to the best of my knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this statement.

Role	First Name	Last Name	Title	Email Address
President or Authorized Officer/Trustee	Libby	Albert	Executive Director	libbyalbert@walkawaycampaign.com
Chief Financial Officer or Treasurer	Brandon	Straka	Treasurer	brandon.straka@yahoo.com

Signature of President or Authorized Officer/Trustee

DocuSigned by:

Libby Albert

4/25/2019

13D793C4356C4DA...

Signature of Chief Financial Officer or Treasurer

DocuSigned by:

Brandon Straka

4/25/2019

8DAB3C64AE08414...

Appendix A - List all chapters, branches and affiliates of your organization		
Organization Name	Relationship	Mailing address

Appendix B - List all officers, directors, trustees, key persons/key employees			
Name	Title	Mailing address	Email

Appendix C - Names/DBA/Assumed Names	
Names/DBA/Assumed Names	

Appendix D - Previous Organization Name	
Previous organization Name	

Commonwealth of Virginia



STATE CORPORATION COMMISSION

Richmond, December 20, 2018

This is to certify that the certificate of incorporation of

#WalkAway Foundation

was this day issued and admitted to record in this office and that the said corporation is authorized to transact its business subject to all Virginia laws applicable to the corporation and its business. Effective date: December 20, 2018



State Corporation Commission

Attest:

Joel H. Peck
Clerk of the Commission

The undersigned, in order to form a corporate entity under Chapter 10 of Title 13.1 of the Code of Virginia, adopts the following Articles of Incorporation.

ARTICLE I NAME & REGISTERED AGENT/OFFICE

The name of this corporation shall be “#WalkAway Foundation”.

The corporation’s initial registered agent shall be Dan Backer, Esq. The initial registered agent is an individual who is a resident of Virginia and a member of the Virginia State Bar.

The corporation’s initial registered office address, which is identical to the business office of the initial registered agent, shall be:

441 North Lee Street Suite 300
Alexandria, Virginia 22314

The registered office is physically located in the City of Alexandria.

ARTICLE II PURPOSE

This corporation is organized exclusively for charitable and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, as now enacted or hereafter amended.

ARTICLE III LIMITATIONS

At all times the following shall operate as conditions restricting operations and activities of the corporation:

1. No part of the net earnings of the corporation shall inure to any member of the corporation not qualifying as exempt under Section 501(c)(3) of the Internal Revenue Code, as now enacted or hereafter amended, nor to any Director or officer of the corporation, nor to any other private persons, excepting solely such reasonable compensation that the corporation shall pay for services actually rendered to the corporation, or allowed by the corporation as a reasonable allowance for authorized expenditures incurred on behalf of the corporation; and
2. No substantial part of the activities of the corporation shall constitute the carrying on of propaganda or otherwise attempting to influence legislation, or any initiative or referendum before the public, and the corporation shall not participate in, or intervene in (including by publication or distribution of statements), any political campaign on behalf of, or in opposition to, any candidate for public office; and
3. Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on by a corporation exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code, as now enacted or hereafter amended.

4. The corporation shall not lend any of its assets to any officer or director of this corporation, or guarantee to any person the payment of a loan by an officer or director of this corporation.

ARTICLE IV DIRECTORS/MEMBERS

The corporation shall have a membership, and may have voting and non-voting classes of same, as defined in the corporation's bylaws. The management and affairs of the corporation shall be at all times under the direction of a Board of Directors, whose operations in governing the corporation shall be defined by statute and by the corporation's by-laws. No member or Director shall have any right, title, or interest in or to any property of the corporation.

The initial directors are:

Brandon Straka
2337 1st Avenue, Apt. 1FS
New York, NY 10035

Tracy Diaz
2885 Desert Rose St.
Little River, SC 29566

Maria Albanese
11268 Timbercrest Road
Springhill, FL 34068

The Chairman shall serve a two-year term based on the calendar year, and may be re-elected to subsequent terms. The Board of Directors shall elect a Chairman from the Board of Directors then in office. Members of the Board of Directors shall be appointed by the Chairman of the Board provided that such appointments are ratified by a majority of the Board members already in office by or at the next Board meeting.

ARTICLE V DEBT OBLIGATIONS AND PERSONAL LIABILITY

No member, officer or Director of this corporation shall be personally liable for the debts or obligations of this corporation of any nature whatsoever, nor shall any of the property of the members, officers or Directors be subject to the payment of the debts or obligations of this corporation.

ARTICLE VI DISSOLUTION

Upon the time of dissolution of the corporation, assets shall be distributed by the Board of Directors, after paying or making provisions for the payment of all debts, obligations, liabilities,

costs and expenses of the corporation, for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose or shall be distributed to another Section 501(c)(3) organization. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the jurisdiction in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

ARTICLE VII INCORPORATOR

The incorporator of this corporation is:

Dan Backer, Esq.
441 North Lee Street Suite 300
Alexandria, Virginia 22314

The undersigned incorporator certifies both that he executes these Articles for the purposes herein stated, and that by such execution, he affirms the understanding that should any of the information in these Articles be intentionally or knowingly misstated, he is subject to the criminal penalties put forth in § 13.1-811 of the Code of Virginia.

Dan Backer

Signature
12/18/2018

Date

Dan Backer
Printed Name

BYLAWS OF #WalkAway Foundation

ARTICLE I

Purposes

The purpose or purposes for which #WalkAway Foundation (“the Organization”) is to operate is exclusively for educational and charitable purposes as a public charity described in section 170(b)(1)(A) and within the meaning of section 501(c)(3) of the Internal Revenue Code and regulations issued there under.

ARTICLE II

Board of Directors

Section 1. Number and term of Directors.

The business, property and affairs of the Organization shall be managed by a Board of Directors (“the Board”) composed of the Chair of the Board, and a number of other Directors as determined by these Bylaws, and any officers of the Organization as ex-officio, non-voting, Board Members. Each Director shall hold office for the term for which the Director is appointed and until the Director’s successor is appointed and qualified. Director shall have the same meaning as both Director and Trustee as defined by the Internal Revenue Service as pertains to section 501(c)(3) organizations. At the execution of these Bylaws, there shall be three (3) Directors, who shall be named and affix their signature below.

Section 2. Chair of the Board.

The Chair of the Board shall have the power to call meetings of the Board and preside over all meetings of the Board. The Chair shall have the power to appoint Directors subject to ratification by a majority of the Board members already in office by or at the next Board meeting. The Chair shall have the power to create new director positions or, upon the expiration of a term or vacancy in a director position, the elimination of direct positions, provided that at all times there are at least three (3), subject to ratification by a majority of the Board members already in office by or at the next Board meeting. The Chair shall have the power to remove any Director from office provided that the removal is ratified by a majority of the Board members already in office by or at the next board meeting. The Chair shall serve a two-year term based on the calendar year, and may be re-elected to subsequent terms. The Board of Directors shall elect a Chair from the Board of Directors then in office.

Section 3. Tenure of Directors.

Directors shall serve a two-year term based on the calendar year, and may be re-appointed to subsequent terms.

Section 4. Meetings.

The Board of Directors shall meet at any time of its choosing and at least once annually to transact any business which may require the action of a regularly constituted meeting of the Board and any other business which may properly come before the meeting. Meetings of the Board shall be called at the discretion of the Chair of the Board at a time and place the Chair shall direct, with a minimum of fifteen days written notice of the time and place of such meetings. Waiver of notice may be obtained from the Board of Directors. A quorum at any meeting shall be a majority of all Directors. Voting shall be by voice unless otherwise determined at the meeting.

Section 5. Telephonic Conferences.

A Director may participate in a Board meeting by conference telephone or similar communication equipment by which all persons participating in the meeting may hear each other, if all participants are advised of the communication equipment and the names of the participants in the conference are divulged to all participants. Participation in the meeting pursuant to this section constitutes presence in person at the meeting.

Section 6. Informal Meetings.

Any action required by law to be taken at a meeting of directors, or any action which may be taken at a meeting of Directors, may be taken without a meeting or by delegation, if a consent in writing, setting forth the action so taken, shall be signed by all of the Directors.

ARTICLE III
Officers

Section 1. President.

The President shall be the chief executive officer of the Organization. The President shall have the general and active management of the business of the Organization and shall see that all orders and resolutions of the Board are carried into effect. The President shall have the general powers and duties of supervision and management usually vested in the office of President of a corporation.

Section 2. Vice-President.

The Vice-President shall exercise the powers and perform the duties of the President in the event of death, resignation, disqualification or absence of the President, and such other duties as may be assigned to the Vice-President by the Board of Directors. In the event that the Vice-President shall serve as President due to a vacancy in that office, then the position of Vice-President shall be filled by appointment of the Board as set forth in Section 8, hereof.

Section 3. Secretary.

The Secretary shall keep the minutes and perform the secretarial duties of the Organization and may be required to attend meetings of the Board. An assistant Secretary may be appointed by the Directors and may be required to attend meetings at the discretion of the Directors.

Section 4. Treasurer.

The Treasurer shall be the fiscal officer and shall keep proper financial records of the transactions of the Organization. An assistant Treasurer may be appointed by the Directors and may be required to attend meetings at the discretion of the Directors. The Directors may require the Treasurer and assistant Treasurer to be bonded.

Section 5. Counsel.

Counsel shall be the chief legal officer of Organization and shall coordinate all legal matters of Organization, subject to the direction and approval of the Board or the President. The Counsel shall perform the duties usually performed by the chief legal officer of a corporation and shall have such other authority as the Board or the President may from time to time determine. Counsel may execute contracts and other legal documents in the name of the Organization subject to general authority and supervision of the Board.

Section 6. Other Officers.

In addition to the President, Vice-President, Secretary and Treasurer, who shall be elected by the Board, other officers may be appointed by the President with the approval of the Board.

Section 7. Tenure of office.

All officers shall hold office for two calendar years, or until their successor is qualified. Nothing herein shall be construed to prevent the election of an officer to succeed himself.

Section 8. Eligibility.

No person may hold more than two of the four principal officer positions at any one given time.

Section 9. Vacancies.

Vacancies in office, with the exception of the office of President, shall be filled by persons appointed by the Chair of the Board and ratified by a majority of Board members already in office by or at the next meeting of the Board. Persons so appointed shall serve for the remainder of the term of office.

ARTICLE IV
Conflict of Interest Policy

Section 1. Purpose.

The purpose of the conflict of interest policy is to protect the Organization's interest when contemplating entering into a transaction or arrangement that might benefit the private interest of an officer or director of the Organization or might result in a possible excess benefit transaction. This policy is intended to supplement but not replace any applicable state and federal laws governing conflict of interest applicable to nonprofit and charitable organizations.

Section 2. Definitions.

1. Interested Person. Any Director, officer, or member of a committee with delegated powers from the Board or officers, who has a direct or indirect financial interest, as defined below, is an interested person.
2. Financial Interest. A person has a financial interest if the person has, directly or indirectly, through business, investment, or family:
 - a. An ownership or investment interest in any entity with which the Organization has a transaction or arrangement,
 - b. A compensation arrangement with the Organization or with any entity or individual with which the Organization has a transaction or arrangement, or
 - c. A potential ownership or investment interest in, or compensation arrangement with, any entity or individual which the Organization is negotiating a transaction or arrangement.

Compensation includes direct and indirect remuneration as well as gifts or favors that are not insubstantial. A financial interest is not necessarily a conflict of interest. Under Section 2, paragraph 2, a person who has a financial interest may have a conflict of interest only if the Board or an appropriate committee decides that a conflict of interest exists.

Section 3. Procedures.

1. Duty to Disclose. In connection with any actual or possible conflict of interest, an interested person must disclose the existence of the financial interest and be given the opportunity to disclose all material facts to the directors and members of committees with governing board delegated powers considering the proposed transaction or arrangement.

2. Determining Whether a Conflict of Interest Exists. After disclosure of the financial interest and all material facts, and after any discussion with the interested person, he/she shall leave the governing board or committee meeting while the determination of a conflict of interest is discussed and voted upon. The remaining board or committee members shall decide if a conflict of interest exists.
3. Procedures for Addressing the Conflict of Interest
 - a. An interested person may make a presentation at the governing board or committee meeting, but after the presentation, he/she shall leave the meeting during the discussion of, and the vote on, the transaction or arrangement involving the possible conflict of interest.
 - b. The chairperson of the governing board or committee shall, if appropriate, appoint a disinterested person or committee to investigate alternatives to the proposed transaction or arrangement.
 - c. After exercising due diligence, the governing board or committee shall determine whether the Organization can obtain with reasonable efforts a more advantageous transaction or arrangement from a person or entity that would not give rise to a conflict of interest.
 - d. If a more advantageous transaction or arrangement is not reasonably possible under circumstances not producing a conflict of interest, the governing board or committee shall determine by a majority vote of the disinterested directors whether the transaction or arrangement is in the Organization's best interest, for its own benefit, and whether it is fair and reasonable. In conformity with the above determination, it shall make its decision as to whether to enter into the transaction or arrangement.
4. Violations of the Conflicts of Interest Policy
 - a. If the governing board or committee has reasonable cause to believe a member has failed to disclose actual or possible conflicts of interest, it shall inform the member of the basis for such belief and afford the member an opportunity to explain the alleged failure to disclose.
 - b. If, after hearing the member's response and after making further investigation as warranted by the circumstances, the governing board or committee determines the member has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.

Section 4. Records of proceedings.

The minutes of the governing board and all committees with board delegated powers shall contain:

1. The names of the persons who disclosed or otherwise were found to have a financial interest in connection with an actual or possible conflict of interest, the nature of the financial interest, any action taken to determine whether a conflict of interest was present, and the governing board's or committee's decision as to whether a conflict of interest in fact existed.
2. The names of the persons who were present for discussions and votes relating to the transaction or arrangement, the content of the discussion, including any alternatives to the proposed transaction or arrangement, and a record of any votes taken in connection with the proceedings.

Section 5. Compensation.

A member of the Board or officer may receive compensation, directly or indirectly, from the Organization for services, pursuant to the terms of this Conflict of Interest Policy.

1. Should any member come to receive such compensation through a direct or indirect source, including through acquisition of a going concern that previously was compensated by the Organization, the recipient is precluded from voting on matters pertaining to that compensation.

2. A voting member of any committee whose jurisdiction includes compensation matters and who in any way receives compensation, directly or indirectly, from the Organization for services is precluded from voting on matters pertaining to that member's compensation.
3. No voting member of the governing board or any committee whose jurisdiction includes compensation matters and who receives compensation, directly or indirectly, from the Organization, either individually or collectively, is prohibited from providing information to any committee regarding compensation.

Section 6. Annual statements.

Each Director, principal officer and member of a committee with governing board delegated powers shall annually sign a statement which affirms such person:

1. Has received a copy of the conflicts of interest policy,
2. Has read and understands the policy,
3. Has agreed to comply with the policy, and
4. Understands the Organization is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

Section 7. Periodic reviews.

To ensure the Organization operates in a manner consistent with charitable purposes and does not engage in activities that could jeopardize its tax-exempt status, periodic reviews shall be conducted. The periodic reviews shall, at a minimum, include the following subjects:

1. Whether compensation arrangements and benefits are reasonable, based on competent survey information, and the result of arm's length bargaining.
2. Whether partnerships, joint ventures, and arrangements with management organizations conform to the Organization's written policies, are properly recorded, reflect reasonable investment or payments for goods and services, further charitable purposes and do not result in inurement, impermissible private benefit or in an excess benefit transaction.

Section 8. Use of outside experts.

When conducting the periodic reviews as provided for in this Article, the Organization may, but need not, use outside advisors. If outside experts are used, their use shall not relieve the governing board of its responsibility for ensuring periodic reviews are conducted.

ARTICLE V Indemnification

The Organization shall, to the fullest extent not prohibited by law, indemnify any Director or Officer of the Organization (the "Indemnitee") who is or was involved in any manner (including without limitation, as a party or a witness) in any threatened, pending or completed investigation, claim, action, suit or proceeding, whether civil, criminal, administrative or investigative (including without limitation any action, suit or proceeding brought by or in the right of the Organization to procure a judgment in its favor) (collectively a "Proceeding") by reason of the fact that such Indemnitee is or was serving as a Director or Officer of the Organization or is or was serving another entity as a director, officer, employee, fiduciary or agent at the request of the Organization, against all expenses and liabilities actually and reasonably incurred by such Indemnitee in connection with such Proceeding.

The right to indemnification conferred by this Article V shall be presumed to have been relied upon by an Indemnitee and shall be enforceable as a contract right. In addition, the Organization may, by entering into contracts with individual Indemnites, provide Indemnites with specific rights of indemnification to

the fullest extent permitted by law and may create trust funds, grant security interests, obtain letters of credit or use other means to ensure the payment of such amounts as may be necessary to perform the obligation provided for in this Article V or in any such contract.

Upon making a request for indemnification, an Indemnatee shall be presumed to be entitled to indemnification under this Article V and the Organization shall have the burden of proof to overcome that presumption. Such indemnification shall include the right to receive payment in advance of any expenses incurred by an Indemnatee in connection with any proceeding, consistent with the law of the Commonwealth of Virginia.

Any repeal or amendment of the foregoing provisions of this Article V shall not adversely affect any right or protection of any Indemnatee as to any Proceeding or claim existing at the time of such repeal or amendment.

ARTICLE VI

Dissolution

Upon the time of dissolution of the corporation, assets shall be distributed by the Board, after paying or making provisions for the payment of all debts, obligations, liabilities, costs and expenses of the corporation, for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose or shall be distributed to another section 501(c)(3) organization. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the jurisdiction in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

ARTICLE VII

Fiscal Year

The Fiscal year of the Organization shall begin on the first day of January and end on the last day of December in each year.

ARTICLE VIII

Amendments

The Articles of Incorporation or these Bylaws may be amended by any duly constituted meeting of the Board by a majority vote of all Directors whether or not actually in attendance. Addendums containing the name and signature of officers and directors may be appended at any time if confirmed and executed by the Chair of the Board.

ARTICLE IX

Parliamentary Authority

The proceedings and meetings of the Organization shall be governed by the current edition of *Robert's Rules of Order Newly Revised* in all cases in which they are applicable and not inconsistent with the Articles of Incorporation of the Organization.

ARTICLE X

Adoption

These Bylaws shall be adopted and effective as of December 27, 2018, and amend, replace, and expunge all prior governing instruments, except the Articles of Incorporation, by the signature of the below Directors. These Bylaws may be signed in counterparts so long as each counterpart is attached and initialed by the Chair of the Board.



12/27/2018

Brandon Straka, Chair



12/27/2018

Tracy Diaz, Director



12/27/2018

Maria Albanese, Director

**BYLAWS OF
#WalkAway Foundation**

EXHIBIT A

#WalkAway Foundation hereby appoints Brandon Straka as President in accordance with the Bylaws.

#WalkAway Foundation hereby appoints Brandon Straka as Chief Financial Officer (Treasurer) in accordance with the Bylaws.

This Exhibit A shall be adopted and effective as of December 27, 2018 by unanimous consent of the Board of Directors and the below signatures accepting such appointments. A signed copy of this Exhibit A transmitted by electronic transmission shall be deemed to have the same legal effect as delivery of an original executed copy.



12/27/2018

Brandon Straka, Chair, President, and Treasurer



12/27/2018

Tracy Diaz, Director



12/27/2018

Maria Albanese, Director

Form 1023 Checklist

(Revised December 2017)

Application for Recognition of Exemption under Section 501(c)(3) of the Internal Revenue Code

Note: Retain a copy of the completed Form 1023 in your permanent records. Refer to the General Instructions regarding Public Inspection of approved applications.

Check each box to finish your application (Form 1023). Send this completed Checklist with your filled-in application. If you have not answered all the items below, your application may be returned to you as incomplete.

- ☒ Assemble the application and materials in this order.
- Form 1023 Checklist
 - Form 2848, *Power of Attorney and Declaration of Representative* (if filing)
 - Form 8821, *Tax Information Authorization* (if filing)
 - Expedite request (if requesting)
 - Application (Form 1023 and Schedules A through H, as required)
 - Articles of organization
 - Amendments to articles of organization in chronological order
 - Bylaws or other rules of operation and amendments
 - Documentation of nondiscriminatory policy for schools, as required by Schedule B
 - Form 5768, *Election/Revocation of Election by an Eligible Section 501(c)(3) Organization To Make Expenditures To Influence Legislation* (if filing)
 - All other attachments, including explanations, financial data, and printed materials or publications. Label each page with name and EIN.
- ☒ User fee payment placed in envelope on top of checklist. DO NOT STAPLE or otherwise attach your check or money order to your application. Instead, just place it in the envelope.
- ☒ Employer Identification Number (EIN)
- ☒ Completed Parts I through XI of the application, including any requested information and any required Schedules A through H.
- You must provide specific details about your past, present, and planned activities.
 - Generalizations or failure to answer questions in the Form 1023 application will prevent us from recognizing you as tax exempt.
 - Describe your purposes and proposed activities in specific easily understood terms.
 - Financial information should correspond with proposed activities.
- ☐ Schedules. Submit only those schedules that apply to you and check either "Yes" or "No" below.
- | | | | | | |
|------------|------------------------------|--|------------|------------------------------|--|
| Schedule A | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | Schedule E | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Schedule B | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | Schedule F | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Schedule C | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | Schedule G | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Schedule D | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | Schedule H | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |

- ☒ An exact copy of your complete articles of organization (creating document). Absence of the proper purpose and dissolution clauses is the number one reason for delays in the issuance of determination letters.
 - Location of Purpose Clause from Part III, line 1 (Page, Article and Paragraph Number) [Page 1, Article II](#)
 - Location of Dissolution Clause from Part III, line 2b or 2c (Page, Article and Paragraph Number) or by operation of state law [Page 2, Article VI](#)
- ☒ Signature of an officer, director, trustee, or other official who is authorized to sign the application.
 - Signature at Part XI of Form 1023.
- ☒ Your name on the application must be the same as your legal name as it appears in your articles of organization.

Send completed Form 1023, user fee payment, and all other required information, to:

Internal Revenue Service
Attention: EO Determination Letters
Stop 31
P.O. Box 12192
Covington, KY 41012-0192

If you are using express mail or a delivery service, send Form 1023, user fee payment, and attachments to:

Internal Revenue Service
Attention: EO Determination Letters
Stop 31
201 West Rivercenter Boulevard
Covington, KY 41011

Form **1023**
(Rev. December 2017)
Department of the Treasury
Internal Revenue Service

Application for Recognition of Exemption Under Section 501(c)(3) of the Internal Revenue Code

► **Do not enter social security numbers on this form as it may be made public.**
► **Go to www.irs.gov/Form1023 for instructions and the latest information.**

(99) OMB No. 1545-0056
Note: If exempt status is approved, this application will be open for public inspection.

Use the instructions to complete this application and for a definition of all bold items. For additional help, call IRS Exempt Organizations Customer Account Services toll-free at 1-877-829-5500. Visit our website at www.irs.gov for forms and publications. If the required information and documents are not submitted with payment of the appropriate user fee, the application may be returned to you.

Attach additional sheets to this application if you need more space to answer fully. Put your name and EIN on each sheet and identify each answer by Part and line number. Complete Parts I – XI of Form 1023 and submit only those Schedules (A through H) that apply to you.

Part I Identification of Applicant

1 Full name of organization (exactly as it appears in your organizing document)		2 c/o Name (if applicable)	
#WalkAway Foundation			
3 Mailing address (Number and street) (see instructions)	Room/Suite	4 Employer Identification Number (EIN)	
441 North Lee Street	300	83-2820906	
City or town, state or country, and ZIP + 4		5 Month the annual accounting period ends (01 – 12)	
Alexandria, VA 22314-2301		12	
6 Primary contact (officer, director, trustee, or authorized representative)		b Phone: 202-210-5431	
a Name:		c Fax: (optional) 202-478-0750	
Dan Backer, Esq.			
7 Are you represented by an authorized representative, such as an attorney or accountant? If "Yes," provide the authorized representative's name, and the name and address of the authorized representative's firm. Include a completed Form 2848, <i>Power of Attorney and Declaration of Representative</i> , with your application if you would like us to communicate with your representative.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8 Was a person who is not one of your officers, directors, trustees, employees, or an authorized representative listed in line 7, paid, or promised payment, to help plan, manage, or advise you about the structure or activities of your organization, or about your financial or tax matters? If "Yes," provide the person's name, the name and address of the person's firm, the amounts paid or promised to be paid, and describe that person's role.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9a Organization's website:			
b Organization's email: (optional)			
10 Certain organizations are not required to file an information return (Form 990 or Form 990-EZ). If you are granted tax-exemption, are you claiming to be excused from filing Form 990 or Form 990-EZ? If "Yes," explain. See the instructions for a description of organizations not required to file Form 990 or Form 990-EZ.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11 Date incorporated if a corporation, or formed, if other than a corporation. (MM/DD/YYYY)		12 / 20 / 2018	
12 Were you formed under the laws of a foreign country ? If "Yes," state the country.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

For Paperwork Reduction Act Notice, see instructions.

Cat, No. 17133K

Form **1023** (Rev. 12-2017)

Part II Organizational Structure

You must be a corporation (including a limited liability company), an unincorporated association, or a trust to be tax exempt. See instructions. **DO NOT file this form unless you can check "Yes" on lines 1, 2, 3, or 4.**

- 1** Are you a **corporation**? If "Yes," attach a copy of your articles of incorporation showing **certification of filing** with the appropriate state agency. Include copies of any amendments to your articles and be sure they also show state filing certification. ☒ **Yes** ☐ **No**
- 2** Are you a **limited liability company (LLC)**? If "Yes," attach a copy of your articles of organization showing certification of filing with the appropriate state agency. Also, if you adopted an operating agreement, attach a copy. Include copies of any amendments to your articles and be sure they show state filing certification. Refer to the instructions for circumstances when an LLC should not file its own exemption application. ☐ **Yes** ☒ **No**
- 3** Are you an **unincorporated association**? If "Yes," attach a copy of your articles of association, constitution, or other similar organizing document that is dated and includes at least two signatures. Include signed and dated copies of any amendments. ☐ **Yes** ☒ **No**
- 4a** Are you a **trust**? If "Yes," attach a signed and dated copy of your trust agreement. Include signed and dated copies of any amendments. ☐ **Yes** ☒ **No**
- b** Have you been funded? If "No," explain how you are formed without anything of value placed in trust. ☐ **Yes** ☐ **No**
- 5** Have you adopted **bylaws**? If "Yes," attach a current copy showing date of adoption. If "No," explain how your officers, directors, or trustees are selected. ☒ **Yes** ☐ **No**

Part III Required Provisions in Your Organizing Document

The following questions are designed to ensure that when you file this application, your organizing document contains the required provisions to meet the organizational test under section 501(c)(3). Unless you can check the boxes in both lines 1 and 2, your organizing document does not meet the organizational test. **DO NOT file this application until you have amended your organizing document.** Submit your original and amended organizing documents (showing state filing certification if you are a corporation or an LLC) with your application.

- 1** Section 501(c)(3) requires that your organizing document state your exempt purpose(s), such as charitable, religious, educational, and/or scientific purposes. Check the box to confirm that your organizing document meets this requirement. Describe specifically where your organizing document meets this requirement, such as a reference to a particular article or section in your organizing document. Refer to the instructions for exempt purpose language. ☒
- Location of Purpose Clause (Page, Article, and Paragraph): **Articles of Incorporation, Page 1, Article II**
- 2a** Section 501(c)(3) requires that upon dissolution of your organization, your remaining assets must be used exclusively for exempt purposes, such as charitable, religious, educational, and/or scientific purposes. Check the box on line 2a to confirm that your organizing document meets this requirement by express provision for the distribution of assets upon dissolution. If you rely on state law for your dissolution provision, do not check the box on line 2a and go to line 2c. ☒
- b** If you checked the box on line 2a, specify the location of your dissolution clause (Page, Article, and Paragraph). Do not complete line 2c if you checked box 2a. **Articles of Incorporation, Page 2, Article VI**
- c** See the instructions for information about the operation of state law in your particular state. Check this box if you rely on operation of state law for your dissolution provision and indicate the state: ☐

Part IV Narrative Description of Your Activities***THIS ATTACHMENT IS REQUIRED!***

Using an attachment, describe your *past*, *present*, and *planned* activities in a narrative. If you believe that you have already provided some of this information in response to other parts of this application, you may summarize that information here and refer to the specific parts of the application for supporting details. You may also attach representative copies of newsletters, brochures, or similar documents for supporting details to this narrative. Remember that if this application is approved, it will be open for public inspection. Therefore, your narrative description of activities should be thorough and accurate. Refer to the instructions for information that must be included in your description.

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors

- 1a** List the names, titles, and mailing addresses of all of your officers, directors, and trustees. For each person listed, state their total annual **compensation**, or proposed compensation, for all services to the organization, whether as an officer, employee, or other position. Use actual figures, if available. Enter "none" if no compensation is or will be paid. If additional space is needed, attach a separate sheet. Refer to the instructions for information on what to include as compensation.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
Brandon Straka	Chairman	2337 1st Avenue, Apt. 1FS New York, NY 10035	\$0.00
Tracy Diaz	Director	2885 Desert Rose Street Little River, SC 29566	\$0.00
Maria Albanese	Director	11268 Timbercrest Road Springhill, FL 34068	\$0.00

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)

- b** List the names, titles, and mailing addresses of each of your five highest compensated employees who receive or will receive compensation of more than \$50,000 per year. Use the actual figure, if available. Refer to the instructions for information on what to include as compensation. Do not include officers, directors, or trustees listed in line 1a.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
Libby Albert	Executive Director	5538 Albin Drive Greenacres, FL 33463	\$65,000.00

- c** List the names, names of businesses, and mailing addresses of your five highest compensated **independent contractors** that receive or will receive compensation of more than \$50,000 per year. Use the actual figure, if available. Refer to the instructions for information on what to include as compensation.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)

The following "Yes" or "No" questions relate to *past, present, or planned* relationships, transactions, or agreements with your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in lines 1a, 1b, and 1c.

- 2a** Are any of your officers, directors, or trustees **related** to each other through **family** or **business relationships**? If "Yes," identify the individuals and explain the relationship. ☐ Yes ☒ No

- b** Do you have a business relationship with any of your officers, directors, or trustees other than through their position as an officer, director, or trustee? If "Yes," identify the individuals and describe the business relationship with each of your officers, directors, or trustees. ☐ Yes ☒ No

- c** Are any of your officers, directors, or trustees related to your highest compensated employees or highest compensated independent contractors listed on lines 1b or 1c through family or business relationships? If "Yes," identify the individuals and explain the relationship. ☐ Yes ☒ No

- 3a** For each of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, or 1c, attach a list showing their name, qualifications, average hours worked, and duties.

- b** Do any of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, or 1c receive compensation from any other organizations, whether tax exempt or taxable, that are related to you through **common control**? If "Yes," identify the individuals, explain the relationship between you and the other organization, and describe the compensation arrangement. ☐ Yes ☒ No

- 4** In establishing the compensation for your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, and 1c, the following practices are recommended, although they are not required to obtain exemption. Answer "Yes" to all the practices you use.

- a** Do you or will the individuals that approve compensation arrangements follow a conflict of interest policy? ☒ Yes ☐ No
- b** Do you or will you approve compensation arrangements in advance of paying compensation? ☒ Yes ☐ No
- c** Do you or will you document in writing the date and terms of approved compensation arrangements? ☒ Yes ☐ No

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)

- d** Do you or will you record in writing the decision made by each individual who decided or voted on compensation arrangements? ☒ **Yes** ☐ **No**
- e** Do you or will you approve compensation arrangements based on information about compensation paid by **similarly situated** taxable or tax-exempt organizations for similar services, current compensation surveys compiled by independent firms, or actual written offers from similarly situated organizations? Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation. ☒ **Yes** ☐ **No**
- f** Do you or will you record in writing both the information on which you relied to base your decision and its source? ☒ **Yes** ☐ **No**
- g** If you answered "No" to any item on lines 4a through 4f, describe how you set compensation that is **reasonable** for your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in Part V, lines 1a, 1b, and 1c.
-
- 5a** Have you adopted a **conflict of interest policy** consistent with the sample conflict of interest policy in Appendix A to the instructions? If "Yes," provide a copy of the policy and explain how the policy has been adopted, such as by resolution of your governing board. If "No," answer lines 5b and 5c. ☒ **Yes** ☐ **No**
- b** What procedures will you follow to assure that persons who have a conflict of interest will not have influence over you for setting their own compensation?
- c** What procedures will you follow to assure that persons who have a conflict of interest will not have influence over you regarding business deals with themselves?
Note: A conflict of interest policy is recommended though it is not required to obtain exemption. Hospitals, see Schedule C, Section I, line 14.
-
- 6a** Do you or will you compensate any of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in lines 1a, 1b, or 1c through **non-fixed payments**, such as discretionary bonuses or revenue-based payments? If "Yes," describe all non-fixed compensation arrangements, including how the amounts are determined, who is eligible for such arrangements, whether you place a limitation on total compensation, and how you determine or will determine that you pay no more than reasonable compensation for services. Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation. ☐ **Yes** ☒ **No**
- b** Do you or will you compensate any of your employees, other than your officers, directors, trustees, or your five highest compensated employees who receive or will receive compensation of more than \$50,000 per year, through non-fixed payments, such as discretionary bonuses or revenue-based payments? If "Yes," describe all non-fixed compensation arrangements, including how the amounts are or will be determined, who is or will be eligible for such arrangements, whether you place or will place a limitation on total compensation, and how you determine or will determine that you pay no more than reasonable compensation for services. Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation. ☐ **Yes** ☒ **No**
-
- 7a** Do you or will you purchase any goods, services, or assets from any of your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," describe any such purchase that you made or intend to make, from whom you make or will make such purchases, how the terms are or will be negotiated at **arm's length**, and explain how you determine or will determine that you pay no more than **fair market value**. Attach copies of any written contracts or other agreements relating to such purchases. ☐ **Yes** ☒ **No**
- b** Do you or will you sell any goods, services, or assets to any of your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," describe any such sales that you made or intend to make, to whom you make or will make such sales, how the terms are or will be negotiated at arm's length, and explain how you determine or will determine you are or will be paid at least fair market value. Attach copies of any written contracts or other agreements relating to such sales. ☐ **Yes** ☒ **No**
-
- 8a** Do you or will you have any leases, contracts, loans, or other agreements with your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," provide the information requested in lines 8b through 8f. ☒ **Yes** ☐ **No**
- b** Describe any written or oral arrangements that you made or intend to make.
- c** Identify with whom you have or will have such arrangements.
- d** Explain how the terms are or will be negotiated at arm's length.
- e** Explain how you determine you pay no more than fair market value or you are paid at least fair market value.
- f** Attach copies of any signed leases, contracts, loans, or other agreements relating to such arrangements.
-
- 9a** Do you or will you have any leases, contracts, loans, or other agreements with any organization in which any of your officers, directors, or trustees are also officers, directors, or trustees, or in which any individual officer, director, or trustee owns more than a 35% interest? If "Yes," provide the information requested in lines 9b through 9f. ☐ **Yes** ☒ **No**

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)

- b** Describe any written or oral arrangements you made or intend to make.
- c** Identify with whom you have or will have such arrangements.
- d** Explain how the terms are or will be negotiated at arm's length.
- e** Explain how you determine or will determine you pay no more than fair market value or that you are paid at least fair market value.
- f** Attach a copy of any signed leases, contracts, loans, or other agreements relating to such arrangements.

Part VI Your Members and Other Individuals and Organizations That Receive Benefits From You

The following "Yes" or "No" questions relate to goods, services, and funds you provide to individuals and organizations as part of your activities. Your answers should pertain to *past*, *present*, and *planned* activities. See instructions.

- 1a** In carrying out your exempt purposes, do you provide goods, services, or funds to individuals? If "Yes," describe each program that provides goods, services, or funds to individuals. ☐ Yes ☒ No
- b** In carrying out your exempt purposes, do you provide goods, services, or funds to organizations? If "Yes," describe each program that provides goods, services, or funds to organizations. ☐ Yes ☒ No
- 2** Do any of your programs limit the provision of goods, services, or funds to a specific individual or group of specific individuals? For example, answer "Yes," if goods, services, or funds are provided only for a particular individual, your members, individuals who work for a particular employer, or graduates of a particular school. If "Yes," explain the limitation and how recipients are selected for each program. ☐ Yes ☒ No
- 3** Do any individuals who receive goods, services, or funds through your programs have a family or business relationship with any officer, director, trustee, or with any of your highest compensated employees or highest compensated independent contractors listed in Part V, lines 1a, 1b, and 1c? If "Yes," explain how these related individuals are eligible for goods, services, or funds. ☐ Yes ☒ No

Part VII Your History

The following "Yes" or "No" questions relate to your history. See instructions.

- 1** Are you a **successor** to another organization? Answer "Yes," if you have taken or will take over the activities of another organization; you took over 25% or more of the fair market value of the net assets of another organization; or you were established upon the conversion of an organization from for-profit to nonprofit status. If "Yes," complete Schedule G. ☐ Yes ☒ No
- 2** Are you submitting this application more than 27 months after the end of the month in which you were legally formed? If "Yes," complete Schedule E. ☐ Yes ☒ No

Part VIII Your Specific Activities

The following "Yes" or "No" questions relate to specific activities that you may conduct. Check the appropriate box. Your answers should pertain to *past*, *present*, and *planned* activities. See instructions.

- 1** Do you support or oppose candidates in **political campaigns** in any way? If "Yes," explain. ☐ Yes ☒ No
- 2a** Do you attempt to **influence legislation**? If "Yes," explain how you attempt to influence legislation and complete line 2b. If "No," go to line 3a. ☐ Yes ☒ No
- b** Have you made or are you making an **election** to have your legislative activities measured by expenditures by filing Form 5768? If "Yes," attach a copy of the Form 5768 that was already filed or attach a completed Form 5768 that you are filing with this application. If "No," describe whether your attempts to influence legislation are a substantial part of your activities. Include the time and money spent on your attempts to influence legislation as compared to your total activities. ☐ Yes ☐ No
- 3a** Do you or will you operate bingo or **gaming** activities? If "Yes," describe who conducts them, and list all revenue received or expected to be received and expenses paid or expected to be paid in operating these activities. **Revenue and expenses** should be provided for the time periods specified in Part IX, Financial Data. ☐ Yes ☒ No
- b** Do you or will you enter into contracts or other agreements with individuals or organizations to conduct bingo or gaming for you? If "Yes," describe any written or oral arrangements that you made or intend to make, identify with whom you have or will have such arrangements, explain how the terms are or will be negotiated at arm's length, and explain how you determine or will determine you pay no more than fair market value or you will be paid at least fair market value. Attach copies of any written contracts or other agreements relating to such arrangements. ☐ Yes ☒ No
- c** List the states and local jurisdictions, including Indian Reservations, in which you conduct or will conduct gaming or bingo.

Part VIII Your Specific Activities (Continued)

4a Do you or will you undertake **fundraising**? If "Yes," check all the fundraising programs you do or will conduct. See instructions. ☒ **Yes** ☐ **No**

- | | |
|---|--|
| <input type="checkbox"/> mail solicitations | <input checked="" type="checkbox"/> phone solicitations |
| <input checked="" type="checkbox"/> email solicitations | <input checked="" type="checkbox"/> accept donations on your website |
| <input checked="" type="checkbox"/> personal solicitations | <input type="checkbox"/> receive donations from another organization's website |
| <input type="checkbox"/> vehicle, boat, plane, or similar donations | <input type="checkbox"/> government grant solicitations |
| <input type="checkbox"/> foundation grant solicitations | <input type="checkbox"/> Other |

Attach a description of each fundraising program.

b Do you or will you have written or oral contracts with any individuals or organizations to raise funds for you? If "Yes," describe these activities. Include all revenue and expenses from these activities and state who conducts them. Revenue and expenses should be provided for the time periods specified in Part IX, Financial Data. Also, attach a copy of any contracts or agreements. ☒ **Yes** ☐ **No**

c Do you or will you engage in fundraising activities for other organizations? If "Yes," describe these arrangements. Include a description of the organizations for which you raise funds and attach copies of all contracts or agreements. ☐ **Yes** ☒ **No**

d List all states and local jurisdictions in which you conduct fundraising. For each state or local jurisdiction listed, specify whether you fundraise for your own organization, you fundraise for another organization, or another organization fundraises for you.

e Do you or will you maintain separate accounts for any contributor under which the contributor has the right to advise on the use or distribution of funds? Answer "Yes" if the donor may provide advice on the types of investments, distributions from the types of investments, or the distribution from the donor's contribution account. If "Yes," describe this program, including the type of advice that may be provided and submit copies of any written materials provided to donors. ☐ **Yes** ☒ **No**

5 Are you **affiliated** with a governmental unit? If "Yes," explain. ☐ **Yes** ☒ **No**

6a Do you or will you engage in **economic development**? If "Yes," describe your program. ☐ **Yes** ☒ **No**

b Describe in full who benefits from your economic development activities and how the activities promote exempt purposes.

7a Do or will persons other than your employees or volunteers **develop** your facilities? If "Yes," describe each facility, the role of the developer, and any business or family relationship(s) between the developer and your officers, directors, or trustees. ☐ **Yes** ☒ **No**

b Do or will persons other than your employees or volunteers **manage** your activities or facilities? If "Yes," describe each activity and facility, the role of the manager, and any business or family relationship(s) between the manager and your officers, directors, or trustees. ☐ **Yes** ☒ **No**

c If there is a business or family relationship between any manager or developer and your officers, directors, or trustees, identify the individuals, explain the relationship, describe how contracts are negotiated at arm's length so that you pay no more than fair market value, and submit a copy of any contracts or other agreements.

8 Do you or will you enter into **joint ventures**, including partnerships or **limited liability companies** treated as partnerships, in which you share profits and losses with partners other than section 501(c)(3) organizations? If "Yes," describe the activities of these joint ventures in which you participate. ☐ **Yes** ☒ **No**

9a Are you applying for exemption as a childcare organization under section 501(k)? If "Yes," answer lines 9b through 9d. If "No," go to line 10. ☐ **Yes** ☒ **No**

b Do you provide childcare so that parents or caretakers of children you care for can be **gainfully employed** (see instructions)? If "No," explain how you qualify as a childcare organization described in section 501(k). ☐ **Yes** ☐ **No**

c Of the children for whom you provide childcare, are 85% or more of them cared for by you to enable their parents or caretakers to be gainfully employed (see instructions)? If "No," explain how you qualify as a childcare organization described in section 501(k). ☐ **Yes** ☐ **No**

d Are your services available to the general public? If "No," describe the specific group of people for whom your activities are available. Also, see the instructions and explain how you qualify as a childcare organization described in section 501(k). ☐ **Yes** ☐ **No**

10 Do you or will you publish, own, or have rights in music, literature, tapes, artworks, choreography, scientific discoveries, or other **intellectual property**? If "Yes," explain. Describe who owns or will own any copyrights, patents, or trademarks, whether fees are or will be charged, how the fees are determined, and how any items are or will be produced, distributed, and marketed. ☒ **Yes** ☐ **No**

Part VIII Your Specific Activities (Continued)

- 11** Do you or will you accept contributions of: real property; conservation easements; closely held securities; intellectual property such as patents, trademarks, and copyrights; works of music or art; licenses; royalties; automobiles, boats, planes, or other vehicles; or collectibles of any type? If "Yes," describe each type of contribution, any conditions imposed by the donor on the contribution, and any agreements with the donor regarding the contribution. ☐ Yes ☒ No
-
- 12a** Do you or will you operate in a **foreign country or countries?** If "Yes," answer lines 12b through 12d. If "No," go to line 13a. ☐ Yes ☒ No
- b** Name the foreign countries and regions within the countries in which you operate.
- c** Describe your operations in each country and region in which you operate.
- d** Describe how your operations in each country and region further your exempt purposes.
-
- 13a** Do you or will you make grants, loans, or other distributions to organization(s)? If "Yes," answer lines 13b through 13g. If "No," go to line 14a. ☐ Yes ☒ No
- b** Describe how your grants, loans, or other distributions to organizations further your exempt purposes.
- c** Do you have written contracts with each of these organizations? If "Yes," attach a copy of each contract. ☐ Yes ☐ No
- d** Identify each recipient organization and any **relationship** between you and the recipient organization.
- e** Describe the records you keep with respect to the grants, loans, or other distributions you make.
- f** Describe your selection process, including whether you do any of the following.
- (i)** Do you require an application form? If "Yes," attach a copy of the form. ☐ Yes ☐ No
- (ii)** Do you require a grant proposal? If "Yes," describe whether the grant proposal specifies your responsibilities and those of the grantee, obligates the grantee to use the grant funds **only** for the purposes for which the grant was made, provides for periodic written reports concerning the use of grant funds, requires a final written report and an accounting of how grant funds were used, and acknowledges your authority to withhold and/or recover grant funds in case such funds are, or appear to be, misused. ☐ Yes ☐ No
- g** Describe your procedures for oversight of distributions that assure you the resources are used to further your exempt purposes, including whether you require periodic and final reports on the use of resources.
-
- 14a** Do you or will you make grants, loans, or other distributions to foreign organizations? If "Yes," answer lines 14b through 14f. If "No," go to line 15. ☐ Yes ☒ No
- b** Provide the name of each foreign organization, the country and regions within a country in which each foreign organization operates, and describe any relationship you have with each foreign organization.
- c** Does any foreign organization listed in line 14b accept contributions earmarked for a specific country or specific organization? If "Yes," list all earmarked organizations or countries. ☐ Yes ☐ No
- d** Do your contributors know that you have ultimate authority to use contributions made to you at your discretion for purposes consistent with your exempt purposes? If "Yes," describe how you relay this information to contributors. ☐ Yes ☐ No
- e** Do you or will you make pre-grant inquiries about the recipient organization? If "Yes," describe these inquiries, including whether you inquire about the recipient's financial status, its tax-exempt status under the Internal Revenue Code, its ability to accomplish the purpose for which the resources are provided, and other relevant information. ☐ Yes ☐ No
- f** Do you or will you use any additional procedures to ensure that your distributions to foreign organizations are used in furtherance of your exempt purposes? If "Yes," describe these procedures, including site visits by your employees or compliance checks by impartial experts, to verify that grant funds are being used appropriately. ☐ Yes ☐ No

Part VIII Your Specific Activities *(Continued)*

- | | | | |
|-----------|--|--|---|
| 15 | Do you have a close connection with any organizations? If "Yes," explain. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 16 | Are you applying for exemption as a cooperative hospital service organization under section 501(e)? If "Yes," explain. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 17 | Are you applying for exemption as a cooperative service organization of operating educational organizations under section 501(f)? If "Yes," explain. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 18 | Are you applying for exemption as a charitable risk pool under section 501(n)? If "Yes," explain. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 19 | Do you or will you operate a school ? If "Yes," complete Schedule B. Answer "Yes," whether you operate a school as your main function or as a secondary activity. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 20 | Is your main function to provide hospital or medical care ? If "Yes," complete Schedule C. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 21 | Do you or will you provide low-income housing or housing for the elderly or handicapped ? If "Yes," complete Schedule F. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 22 | Do you or will you provide scholarships, fellowships, educational loans, or other educational grants to individuals, including grants for travel, study, or other similar purposes? If "Yes," complete Schedule H. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

Note: Private foundations may use Schedule H to request advance approval of individual grant procedures.

Part IX Financial Data

For purposes of this schedule, years in existence refer to completed tax years.

1. If in existence less than 5 years, complete the statement for each year in existence and provide projections of your likely revenues and expenses based on a reasonable and good faith estimate of your future finances for a total of:
 - a. Three years of financial information if you have not completed one tax year, or
 - b. Four years of financial information if you have completed one tax year. See instructions.
2. If in existence 5 or more years, complete the schedule for the most recent 5 tax years. You will need to provide a separate statement that includes information about the most recent 5 tax years because the data table in Part IX has not been updated to provide for a 5th year. See instructions.

A. Statement of Revenues and Expenses

	Type of revenue or expense	Current tax year	3 prior tax years or 2 succeeding tax years			(e) Provide Total for (a) through (d)
		(a) From <u>12/20/18</u> To <u>12/31/18</u>	(b) From <u>01/01/19</u> To <u>12/31/19</u>	(c) From <u>01/01/20</u> To <u>12/31/20</u>	(d) From _____ To _____	
Revenues	1 Gifts, grants, and contributions received (do not include unusual grants)	0	100,000	100,000		200,000
	2 Membership fees received					
	3 Gross investment income					
	4 Net unrelated business income					
	5 Taxes levied for your benefit					
	6 Value of services or facilities furnished by a governmental unit without charge (not including the value of services generally furnished to the public without charge)					
	7 Any revenue not otherwise listed above or in lines 9–12 below (attach an itemized list)					
	8 Total of lines 1 through 7	0	100,000	100,000		200,000
	9 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to your exempt purposes (attach itemized list)					
	10 Total of lines 8 and 9	0	100,000	100,000		200,000
	11 Net gain or loss on sale of capital assets (attach schedule and see instructions)					
	12 Unusual grants					
	13 Total Revenue Add lines 10 through 12	0	100,000	100,000		200,000
Expenses	14 Fundraising expenses	0				
	15 Contributions, gifts, grants, and similar amounts paid out (attach an itemized list)					
	16 Disbursements to or for the benefit of members (attach an itemized list)					
	17 Compensation of officers, directors, and trustees					
	18 Other salaries and wages		65,000	65,000		
	19 Interest expense					
	20 Occupancy (rent, utilities, etc.)		15,000	15,000		
	21 Depreciation and depletion					
	22 Professional fees		0	0		
	23 Any expense not otherwise classified, such as program services (attach itemized list)		20,000	20,000		
	24 Total Expenses Add lines 14 through 23	0	100,000	100,000		

Part IX Financial Data (Continued)**B. Balance Sheet (for your most recently completed tax year)**Year End: **2018**

(Whole dollars)

Assets		
1	Cash	1
2	Accounts receivable, net	2
3	Inventories	3
4	Bonds and notes receivable (attach an itemized list)	4
5	Corporate stocks (attach an itemized list)	5
6	Loans receivable (attach an itemized list)	6
7	Other investments (attach an itemized list)	7
8	Depreciable and depletable assets (attach an itemized list)	8
9	Land	9
10	Other assets (attach an itemized list)	10
11	Total Assets (add lines 1 through 10)	11
Liabilities		
12	Accounts payable	12
13	Contributions, gifts, grants, etc. payable	13
14	Mortgages and notes payable (attach an itemized list)	14
15	Other liabilities (attach an itemized list)	15
16	Total Liabilities (add lines 12 through 15)	16
Fund Balances or Net Assets		
17	Total fund balances or net assets	17
18	Total Liabilities and Fund Balances or Net Assets (add lines 16 and 17)	18
19	Have there been any substantial changes in your assets or liabilities since the end of the period shown above? If "Yes," explain. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Part X Public Charity Status

Part X is designed to classify you as an organization that is either a **private foundation** or a **public charity**. Public charity status is a more favorable tax status than private foundation status. If you are a private foundation, Part X is designed to further determine whether you are a **private operating foundation**. See instructions.

1a	Are you a private foundation? If "Yes," go to line 1b. If "No," go to line 5 and proceed as instructed. If you are unsure, see the instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b	As a private foundation, section 508(e) requires special provisions in your organizing document in addition to those that apply to all organizations described in section 501(c)(3). Check the box to confirm that your organizing document meets this requirement, whether by express provision or by reliance on operation of state law. Attach a statement that describes specifically where your organizing document meets this requirement, such as a reference to a particular article or section in your organizing document or by operation of state law. See the instructions, including Appendix B, for information about the special provisions that need to be contained in your organizing document. Go to line 2.	<input type="checkbox"/>
2	Are you a private operating foundation? To be a private operating foundation you must engage directly in the active conduct of charitable, religious, educational, and similar activities, as opposed to indirectly carrying out these activities by providing grants to individuals or other organizations. If "Yes," go to line 3. If "No," go to the signature section of Part XI.	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	Have you existed for one or more years? If "Yes," attach financial information showing that you are a private operating foundation; go to the signature section of Part XI. If "No," continue to line 4.	<input type="checkbox"/> Yes <input type="checkbox"/> No
4	Have you attached either (1) an affidavit or opinion of counsel, (including a written affidavit or opinion from a certified public accountant or accounting firm with expertise regarding this tax law matter), that sets forth facts concerning your operations and support to demonstrate that you are likely to satisfy the requirements to be classified as a private operating foundation; or (2) a statement describing your proposed operations as a private operating foundation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	If you answered "No" to line 1a, indicate the type of public charity status you are requesting by checking one of the choices below. You may check only one box.	
	The organization is not a private foundation because it is:	
a	509(a)(1) and 170(b)(1)(A)(i)—a church or a convention or association of churches. Complete and attach Schedule A.	<input type="checkbox"/>
b	509(a)(1) and 170(b)(1)(A)(ii)—a school . Complete and attach Schedule B.	<input type="checkbox"/>
c	509(a)(1) and 170(b)(1)(A)(iii)—a hospital , a cooperative hospital service organization, or a medical research organization operated in conjunction with a hospital. Complete and attach Schedule C.	<input type="checkbox"/>
d	509(a)(3)—an organization supporting either one or more organizations described in line 5a through c, f, h, or i or a publicly supported section 501(c)(4), (5), or (6) organization. Complete and attach Schedule D.	<input type="checkbox"/>

Part X Public Charity Status (Continued)

- e** 509(a)(4) – an organization organized and operated exclusively for testing for public safety. ☐
- f** 509(a)(1) and 170(b)(1)(A)(iv) – an organization operated for the benefit of a college or university that is owned or operated by a governmental unit. ☐
- g** 509(a)(1) and 170(b)(1)(A)(ix) – an agricultural research organization directly engaged in the continuous active conduct of agricultural research in conjunction with a college or university. ☐
- h** 509(a)(1) and 170(b)(1)(A)(vi) – an organization that receives a substantial part of its financial support in the form of contributions from publicly supported organizations, from a governmental unit, or from the general public. ☒
- i** 509(a)(2) – an organization that normally receives not more than one-third of its financial support from gross **investment income** and receives more than one-third of its financial support from contributions, membership fees, and gross receipts from activities related to its exempt functions (subject to certain exceptions). ☐
- j** A publicly supported organization, but unsure if it is described in 5h or 5i. You would like the IRS to decide the correct status. ☐

6 If you checked box h, i, or j in question 5 above, and you have been in existence more than 5 years, you must confirm your public support status. Answer line 6a if you checked box h in line 5 above. Answer line 6b if you checked box i in line 5 above. If you checked box j in line 5 above, answer both lines 6a and 6b.

- a** (i) Enter 2% of line 8, column (e) on Part IX-A Statement of Revenues and Expenses _____
- (ii) Attach a list showing the name and amount contributed by each person, company, or organization whose gifts totaled more than the 2% amount. If the answer is "None," state this.
- b** (i) For each year amounts are included on lines 1, 2, and 9 of Part IX-A Statement of Revenues and Expenses, attach a list showing the name and amount received from each **disqualified person**. If the answer is "None," state this.
- (ii) For each year amounts were included on line 9 of Part IX-A Statement of Revenues and Expenses, attach a list showing the name of and amount received from each payer, other than a disqualified person, whose payments were more than the larger of (1) 1% of Line 10, Part IX-A Statement of Revenues and Expenses, or (2) \$5,000. If the answer is "None," state this.

7 Did you receive any unusual grants during any of the years shown on Part IX-A Statement of Revenues and Expenses? If "Yes," attach a list including the name of the contributor, the date and amount of the grant, a brief description of the grant, and explain why it is unusual. ☐ Yes ☒ No

Part XI User Fee Information and Signature

You must include the correct user fee payment with this application. If you do not submit the correct user fee, we will not process the application and we will return it to you. Your check or money order must be made payable to the United States Treasury. User fees are subject to change. Check our website at www.irs.gov and type "Exempt Organizations User Fee" in the search box, or call Customer Account Services at 1-877-829-5500 for current information.

Enter the amount of the user fee paid: \$600.00

I declare under the penalties of perjury that I am authorized to sign this application on behalf of the above organization and that I have examined this application, including the accompanying schedules and attachments, and to the best of my knowledge it is true, correct, and complete.

Please
Sign
Here


(Signature of Officer, Director, Trustee, or other authorized official)

Dan Backer, Esq.

(Type or print name of signer)

Attorney

(Type or print title or authority of signer)

12/31/18

(Date)

Supplemental PagesName: **#WalkAway Foundation**EIN: **83-2820906**Page **1** of **3****Part I Identification of Applicant**

7. Are you represented by an authorized representative, such as an attorney or accountant? If "Yes," provide the authorized representative's name, and the name and address of the authorized representative's firm. Include a completed Form 2848, *Power of Attorney and Declaration of Representative*, with your application if you would like us to communicate with your representative.

Dan Backer, Esq.

political.law

441 North Lee Street, Ste 300

Alexandria, VA 22314

Part IV Narrative Description of Your Activities

Using an attachment, describe your *past*, *present*, and *planned* activities in a narrative. If you believe that you have already provided some of this information in response to other parts of this application, you may summarize that information here and refer to the specific parts of the application for supporting details. You may also attach representative copies of newsletters, brochures, or similar documents for supporting details to this narrative. Remember that if this application is approved, it will be open for public inspection. Therefore, your narrative description of activities should be thorough and accurate. Refer to the instructions for information that must be included in your description.

#WalkAway Foundation will encourage people to independently evaluate their personal perspective and bias related to their views of public policy and governance. Such objectives will be achieved through the following, depending upon financial resources: the creation and distribution of educational materials discussing these purposes; creation and maintenance of a website and email list to provide information and education with respect to these purposes; the creation of audio-visual material for distribution through various means, including online, to foster such purposes; and speaking engagements to discuss these purposes with interested individuals.

Sufficient funding must be raised before these activities can be initiated. It is expected these activities will eventually be conducted nationwide, but it is expected the initial fundraising activity will primarily occur in Virginia, New York, and the District of Columbia.

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors

- 3a. For each of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, or 1c, attach a list showing their name, qualifications, average hours worked, and duties.

Brandon Straka shall serve as the Chairman of #WalkAway Foundation and is the creator of the #WalkAway movement. He will work an average of 40 hours per week for the Foundation as needed and required. In his role as Chair of the Board of Directors, he will carry out all duties and responsibilities typical for such a position and as required by the Foundation's Bylaws.

Maria Albanese has experience with public policy practices and their impact on the public. She shall serve as a Director and will fulfill all duties and responsibilities typical of this position and as described in the Foundation's Bylaws. She shall work an average of 4 hours per week, as needed.

Tracy Diaz has experience with public policy practices and their impact on the public. She shall serve as a Director and will fulfill all duties and responsibilities typical of this position and as described in the Foundation's Bylaws. She shall work an average of 4 hours per week, as needed.

Libby Albert shall be employed by the Foundation as an Executive Director. She has experience with public policy practices and their impact on the public. The Board shall have oversight over her performance in this role. It is expected she shall work 40 hours per week or as required by the Foundation to successfully fulfill the obligations and responsibilities typical of an Executive Director.

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors

- 5a. Have you adopted a **conflict of interest policy** consistent with the sample conflict of interest policy in Appendix A to the instructions? If "Yes," provide a copy of the policy and explain how the policy has been adopted, such as by resolution of your governing board. If "No," answer lines 5b and 5c.

The Foundation's Conflict of Interest Policy may be found in the provided Bylaws, Page 3, Article IV.

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors

- 8a. Do you or will you have any leases, contracts, loans, or other agreements with your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," provide the information requested in lines 8b through 8f.

- 8b. Describe any written or oral arrangements that you made or intend to make.

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors

8c. Identify with whom you have or will have such arrangements.

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors

8d. Explain how the terms are or will be negotiated at arm's length.

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors

8e. Explain how you determine you pay no more than fair market value or you are paid at least fair market value.

Part VIII Your Specific Activities

4a. Do you or will you undertake **fundraising**? If "Yes," check all the fundraising programs you do or will conduct. See instructions. Attach a description of each fundraising program. **Other** (describe):

The Foundation shall primarily conduct fundraising activities through a developed email list and personal solicitations, including through emails, telephone calls, and personal interactions. The Foundation anticipates it will eventually accept donations on its website as well.

Part VIII Your Specific Activities

4b. Do you or will you have written or oral contracts with any individuals or organizations to raise funds for you? If "Yes," describe these activities. Include all revenue and expenses from these activities and state who conducts them. Revenue and expenses should be provided for the time periods specified in Part IX, Financial Data. Also, attach a copy of any contracts or agreements.

The Foundation may, once sufficient funds are raised, consider hiring a professional to conduct fundraising activities on its behalf. Such a determination shall be made at a later date and with the approval of the Board. The Foundation shall pay no more than the fair market value for such services as determined by a review of industry practices.

Part VIII Your Specific Activities

4d. List all states and local jurisdictions in which you conduct fundraising. For each state or local jurisdiction listed, specify whether you fundraise for your own organization, you fundraise for another organization, or another organization fundraises for you.

As provided in Part IV, the Foundation expects it will initially fundraise in Virginia, New York, and the District of Columbia. Once financially able, the Foundation will explore fundraising activities nationwide.

Part VIII Your Specific Activities

10. Do you or will you publish, own, or have rights in music, literature, tapes, artworks, choreography, scientific discoveries, or other **intellectual property**? If "Yes," explain. Describe who owns or will own any copyrights, patents, or trademarks, whether fees are or will be charged, how the fees are determined, and how any items are or will be produced, distributed, and marketed.

From time to time and in furtherance of its exempt purpose, the Foundation may contract for the use of video content or other such recordings, images, publications, and other such materials for use in its educational programs. The Foundation expects to utilize intellectual property owned by #WalkAway Campaign LLC and other such like-minded organizations. The Foundation shall pay the fair

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market value for such items as determined by industry standards.

Part VIII Your Specific Activities

15. Do you have a **close connection** with any organizations? If "Yes," explain.

#WalkAway Campaign LLC is solely operated by Brandon Straka, who also serves as the Chair of #WalkAway Foundation. #WalkAway Campaign LLC owns the intellectual property rights to "#WalkAway" and such rights are being granted for use by the Foundation. The adopted Bylaws include an appropriate Conflict of Interest Policy and oversight by Board. Each year, every Director on the Board will execute a document indicating they are aware of the Foundation's Conflict of Interest Policy and have abided by its requirements.

Part IX Financial Data

23. Any expense not otherwise classified, such as program services (attach itemized list)

The Foundation expects it will expend approximately \$20,000 in educational material and program expenses in furtherance of its exempt purpose.
